

DEPARTMENT OF THE NAVY **BUREAU OF MEDICINE AND SURGERY** WASHINGTON, D.C. 20390

IN REPLY REFER TO BUMED-742:CFT File: 6470/ USS SANCTUARY Serial: 1251 1 December 1966

From: Chief, Bureau of Medicine and Surgery

To: Director, Division of Licensing and Regulation

U. S. Atomic Energy Commission

Washington, D. C. 20545

USS SANCTUARY (AH-17) Application for Radioisotope License to employ ${\tt I}^{131}$ and ${\tt I}^{125}$ as RISA for blood volume determination

Encl: (1) Subject application

1. Forwarded, recommending approval.

USS SANCTUARY (AH-17) is to be considered licensee rather than , MC, USN. This change has been effected.

The technicians are not considered individual users. This change has been effected.





Form AEC-313a (11-63) 10 CFR 30

UNITED STATES ATOMIC ENERGY COMMISSION

APPLICATION FOR BYPRODUCT MATERIAL LICENSE-MEDICAL

Form approved. Budget Bureau No. 38–R080

| PAGE 1 | SUPPLEMENT A—HUMAN USE | | |
|---|--|-------------|----------|
| | rial is for "human use" (internal administration of byproduct material, or the radiation therefrom to blement and attach to the application for byproduct material license. | human l | peings), |
| (a) USING PHYSICIAN | The state of the s | | |
| | (h) (6) | | |
| LCDR (b) (6) | (D) (O) | | |
| • | tal USS SANCTUARY CTUARY (AH- | | |
| | San Francisco, Calif. c/o F.P.O. San Francisco, Calif. N INDICATED ABOVE IS LICENSED TO DISPENSE DRUGS IN THE PRACTICE OF MEDICINE BY A STATE OR TERRITORY | 96601 | 1 |
| | ES, THE DISTRICT OF COLUMBIA, OR THE COMMONWEALTH OF PUERTO RICO. | (|) |
| | | YES | NO |
| | CRCLE ANS WER | | |
| | ING PHYSICIAN'S CLINICAL RADIOISOTOPE EXPERIENCE (PAGE 3 OF THIS SUPPLEMENT) IS SUBMITTED IN SUPPORT | | |
| | N. IF ANSWER IS NO, USE PAGE 2 OF THIS SUPPLEMENT TO EXPLAIN OR REFER TO OTHER APPLICATION OR ON WHICH THIS PROFESSION APPEARS. | (YES) | NO |
| | CIRCLE ANSWER | | |
| | CINCLE AITH ITEN | | 1 |
| | PROPOSED DIAGNOSIS OR TREATMENT | | |
| (a) DESCRIBE PURPOS (Use page 2 if nec | E FOR WHICH BYPRODUCT MATERIAL WILL BE USED INCLUDING SPECIFIC CONDITIONS OR DISEASES TO BE DIAGNOSED (2015-079): | OR TREATE | D |
| Padia india | seted Comum Albumin for Ctandard Blood Valuma determination | | |
| Madio 10din | ated Serum Albumin for Standard Blood Volume determination. | | |
| (b) CHEMICAL FORM | ADMINISTERED: | | |
| | | | |
| I 131 or I | 125 as iodinated serum albumin | | |
| | | | |
| (c) DESCRIBE PROCED | URES WHICH WILL BE OBSERVED TO MINIMIZE HAZARD FROM HANDLING, STORAGE, AND DISPOSAL OF THE BYPRODUCT | MATERIAL | |
| (c) DESCRIBE PROCED | UKES WHICH WILL BE OBSERVED TO MINIMIZE HAZARD FROM HANDLING, STORAGE, AND DISPOSAL OF THE BIFRODUCT | PAIERIAL: | |
| See page 2 | | | |
| | | | |
| | | | |
| (d) DESCRIPTION AND | D SKETCHES OF SPECIAL DEVICES TO BE USED FOR ADMINISTERING BYPRODUCT MATERIAL TO HUMAN BEINGS ARE | | 1 |
| | TERATURE REFERENCES WILL SUFFICE) CIRCLE ANSWER | YES | NO |
| (2) ON THE WITH | THE PERFORM BRANCH | | 0 |
| | THE ISOTOPES BRANCH PLICATION NO GROLE ANSWER | YES | (NO |
| PROPOSED DOSAGE | 2 | | 1 |
| | strictions. Iternally administered byproduct material other than discrete fixed sources; and in roentgens or rads, as appropriate, for internal in | or external | irradi- |
| | te fixed sources (gold seeds, cabalt needles, etc.) state separately for each condition or disease (use page 2 if necessary): | | |
| Standard pr | e-packaged individual dose syringes(disposable)- 5 to 10 micro | curie | s. |
| | | | , |
| except I 12 | 5. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | ROPOSAL FOR EXPERIMENTAL, NEW OR UNUSUAL HUMAN USES IS ATTACHED. (Attachment | YES | NO |
| | utline of conditions to be evaluated, including data from animal studies and/or abstract of literature CIRCLE ANSWER number and type of patients (i. e. age group, maribund, etc.)) | | |
| reference in day, | COLLO | | |
| | | | |
| | RIAL WILL NOT BE OBTAINED IN PRECALIBRATED FORM FOR ORAL ADMINISTRATION OR IN PRECALIBRATED AND STERIL | IZED FOR | A FOR |
| PARENTERAL ADMINIS | STRATION, DESCRIBE IDENTIFICATION, PROCESSING, AND STANDARDIZATION PROCEDURES: | A | |
| See item 5 | KY DAY MAY | 1 | |
| | TO THE MENT OF THE PARTY OF THE | 275 | 7 |
| | | 010 | |
| | | 1 | |
| THE PROPOSED USE O | OF BYPRODUCT MATERIAL HAS BEEN, OR WILL BE, APPROVED BY THE MEDICAL ISOTOPE COM- dual license application CIRCLE ANSWER | YES | NO |
| | HOSPITAL FACILITIES FOR INDIVIDUAL PRACTICE USE ONLY | | |
| (a) THE APPLICANT H | HAS COMPLETED ARRANGEMENTS FOR A HOSPITAL TO ADMIT RADIOACTIVE PATIENTS WHEN- | | |
| EVER ADVISABLE | . Not applicable CIRCLE ANSWER | YES | NO |
| (b) A COPY OF INST | RUCTIONS TO BE FURNISHED TO THE HOSPITAL AS TO RADIOLOGICAL SAFETY PRECAUTIONS | YES | NO |

UNITED STATES ATOMIC ENERGY COMMISSION

APPLICATION FOR BYPRODUCT MATERIAL LICENSE—MEDICAL

PAGE 2

SUPPLEMENT A-HUMAN USE

This page may be used for providing additional information. Please cross reference to specific items.

Equipment -- Volemetron (Ames)

Facilities—Astainless steel work surface in Urinalysis will be provided for isotope work. The area will be surveyed after each use.

Radiation Protection Program

- 1) Only qualified technicians will handle isotopes under the direct supervision of the licensee.
- 2) Individual dose pre-packaged syringes will minimize risk of contamination.
- 3) Isotopes will be stored in a locked strong box in the laboratory refrigerator.
- 4) Appropriate warning signs will be provided.
- 5) The storage area will be monitored monthly.
- 6) Radioactive wastes, liquid and solid, will be placed in plastic bags and will be sealed in a metal container until decay permits disposal at sea.
- 7) See items 10, 11, 12 Form AEC 313.

Form AEC-313a (11/63) PAGE 3

UNITED STATES ATOMIC ENERGY COMMISSION

APPLICATION FOR BYPRODUCT MATERIAL LICENSE—MEDICAL

SUPPLEMENT A PRECEPTOR STATEMENT

This page is to be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each. Back of page may be used for comments.

9. NAME AND ADDRESS OF APPLICANT PHYSICIAN (Include ZIP Code.)

LCDR MC USN

Pathology Department U. S. Naval Hospital

| (A) | (B) | (C) | (D) |
|-------------------|--|--|---|
| ISOTOPE | CONDITIONS DIAGNOSED OR TREATED | No. Cases Observed (See 1 in key below) | No. Cases Involving Personal Participation (See 2 in key below |
| 1 131 | Diagnosis of thyroid function | 67 | 67 |
| | Dilution studies | 2 | 2 |
| | Excretion studies | | |
| | Brain tumor localization | 1 | 1 |
| | Scanning studies IHSA | 15 | 1'5 |
| | Treatment of hyperthyroidism | | |
| | Treatment of cardiac conditions | - | and the state of |
| | Treatment of thyroid carcinoma | | İ |
| P-32 | Treatment of polycythemia | | |
| Soluble | Treatment of leukemia | | |
| | Treatment of bone metastases | 1 | 1 |
| | Tumor localization | | _ |
| | Intracavitary treatment | | - |
| | Interstitial treatment | | |
| Au-198 | Intracavitary treatment | | |
| | Interstitial treatment | | |
| | Scanning studies | | |
| Cr 51 | Blood determinations | | |
| | Scanning studies | | |
| Co-58 or Co-60 | Diagnosis of pernicious anemia | | |
| Co 60 | Interstitial treatment | | |
| I 192 | Intracavitary treatment | | |
| Co 60 or | Teletherapy treatment Total Blood Volume | 42 | 42 |
| Cs 137 | Red Cell Survival | 3 | 3 |
| Sr 90 | Treatment of superficial diseases of the eye | | <u></u> |
| Other Isotopes | In Vivo Counting | 3 | 3 |
| Use back | Co-57 and Co-60 Schilling Test | 3 | 3 |
| of page | Hg-203 Renal Scan | 12 | 12 |

Key to Column (Continued on Reverse Side)

- 1 Observation should consist of observing radioisotope administration techniques and discussion with preceptor the case histories to establish most appropriate diagnostic and/or therapeutic procedure, limitation, contraindications, etc.
- 2. Personal participation should consist of (a) supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation on dosage to be prescribed; (b) collaboration in calibration of the dose and the actual administration of the dose to the patient, including calculation of the radiation dose, related measurements, and plotting of data; and (c) adequate period of training to enable the physician to manage radioactive patients and to follow patients through diagnosis and/or the course of treatment.

| 11 | DATES | AND | TOTAL | NUMBER | OF | HOURS | OF | CLINICAL | RADIOISOTOPE | TRAINING |
|----|-------|-----|-------|--------|----|-------|----|----------|--------------|----------|
| | | | | | | | | | | |

3 months

Graduated from full-time Medical

12. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF Officers Course (9-17-62 50 12-7-62)

U.S. Naval Hospital Bethesda, Maryland

1**9**-2891**-**5

SN

(Institution) Name and Address

(Byproduct Material License Number)

(Signature of Preceptor)

UNITED STATES. ATOMIC ENERGY COMMISSION

APPLICATION FOR BYPRODUCT MATERIAL LICENSE-MEDICAL

PAGE 4

SUPPLEMENT A-HUMAN USE

This page may be used for providing additional information.

| | (c) | (D) |
|--|-------------------|-------------------|
| I-131 Diagnostic Studies - Continued | 144 | |
| I-131 Hipputope, Renogram I-131 Triolein Fat Metabolism I-131 Oleic Acid, Fat Metabolism I-131 HSA, Placentogram | 25 1 1 4 | 25 1 1 4 |
| Other Isotopes; Diagnostic Studies - Continued | | |
| Au-198 Liver Scan Fe-59 Iron Utilization Fe-59 Plasma Iron Disappearance Fe-59 Invivo Counting | 19 1 1 | 19 1 1 |

| | | | | | | | | | | _ | P | oge Tw |
|-----------------------|---|--|--------------------------|-----------------------|---------------------|--|---------------------------------|--|-------------------------------|----------|------------|--------|
| | TRAINING | AND EXPE | CE OF E | ACH INDIVID | UAL N | AMED IN ITE | M 4 (| Use supplemental | sheets if neces | ssary) | | |
| 8. TYPE C | OF TRAINING | | WHERE TRAINED | | | | | DURATION OF TRAINING | ON THE JOB (Circle answer) | | (Circle o | |
| a. Princip protect | les and practices of | f radiation | Drs. (b) (6) and (b) (6) | | | | | 3 months | Yes N | 40 | Yes | No |
| | activity measurement s and monitoring techniquents | | (b) (6 | (b) (6) | | | | | Yes No | | Yes | No |
| | matics and calculations and measurement of rad | | (5) (5 | | | | | | Yes N | No. | Yes | No |
| | ical effects of radiation | | at USN | ove named Bethesd | a, M | d. | aning | | Yes N | 40 | Yes | No |
| ISOTOPE | MAXIMUM AMOUNT | | _ | topes or equivale | ent expe | DURATION | OF EXP | FRIENCE | TV | DE OF II | CE | 74 1 |
| I131 RISA | 5-10 micro curie /dose | | val Hosp onville, | | | One Ye | ar | | Blood Volume | | | |
| 10. RADIA | ATION DETECTION INST | TRUMENTS. | (Use supplem | nental sheets if no | ece ssary. | .) | | | | | | - |
| | TYPE OF INSTRUMENTS make and model number | | NUMBER AVAILABLE | RADIATION DETECTED | TIVITY RANGE WINDOW | | OW THICKNESS (mg/cm²) | USE (Monitoring, surveying, measuring) | | | uring) | |
| AN-PDR-27 | | | 8 | Gamma, Beta | to 500 hr. | | | Surveying working areas measuring waste for disposal | | | | |
| 12. FILM B | tained by Dam hadges, doshmeters, a badges provi rdence with E | ND BIO-ASSA | AY PROCEDURE | s USED. (For file | m bodge: | s, specify method | | | _ | | .) | |
| acc | IN | FORMATI | ON TO BE | SUBMITTED | ON | ADDITIONA | L SHE | ETS IN DUP | LICATE | - | | |
| | TIES AND EQUIPMENT. | Describe lab | | es and remote han | ndling eq | uipment, storage | contain | | | Explan | atory sket | tch |
| 14. RADIA | TION PROTECTION PRO | GRAM. De | scribe the radio | stion protection p | | AEC-313a ncluding control | | s. If application | covers sealed | sources, | submit le | eak |
| | procedures where applic | | training, and ex | perience of perso | n to per | form leak tests, o | and arror | gements for perfe | orming initial ra | diation | survey, se | erv- |
| 15. WASTI | See Form AEC- E DISPOSAL. If a comm d for disposing of rodica | nercial waste | • | | | | | se, submit detaile | d description of | f method | s which v | will |
| | See Form AEC | | DTIEICATE | (This item m | ust be | complete | l by o | pplicant) | | - | _ | |
| SUPPLE | PPLICANT AND ANY OF RED INCONFORMITY WITE EMENTS ATTACHED HER | FICIAL EXECTION TITLE 10, 0 ETO, IS TRUE | UTING THIS C | ERTIFICATE ON E | SE HALF | OF THE APPLICA 30, AND THAT KNOWLEDGE AN | NT NAM ALL INFO ID RELIEF | ative Of | ficer | N, INQ. | DING A | NY |
| | NG.—18 U. S. C , Se | | | | | | | offense to mak | se a willfully | false st | atement | or |

Form AEC 313 (8 64) 10 CFR 30

UNITED STATES ATOMIC ENERGY COMMISSION

APPLICATION FOR BYPRODUCT MATERIAL LICENSE

Form approved Budget Bureau No. 38-R027

INSTRUCTIONS.—Complete Items 1 through 16 if this is an initial application or an application for renewal of a license. Information contained in previous applications filed with the Commission with respect to Items 8 through 15 may be incorporated by reference provided references are clear and specific. Use supplemental sheets where necessary. Item 16 must be completed on all applications. Mail two copies to: U.S. Atomic Energy Commission, Washington, D.C., 20545, Attention: Isotopes Branch, Division of Materials Licensing. Upon approval of this application, the applicant will receive an AEC Byproduct Material License. An AEC Byproduct Material License is issued in accordance with the general requirements contained in Title 10, Code of Federal Regulations, Part 30, and the Licensee is subject to Title 10, Code of Federal Regulations, Part 20.

1. (a) NAME AND STREET ADDRESS OF APPLICANT. (Institution, firm, hospital



USS SANCTUARY (AH17) FPO San Francisco 96601 (b) STREET ADDRESS(ES) AT WHICH BYPRODUCT MATERIAL WILL BE USED. (If different from 1 (a). Include ZIP Code.)

2. DEPARTMENT TO USE BYPRODUCT MATERIAL

3. PREVIOUS LICENSE NUMBER(S). (If this is an application for renewal of a license, please indicate and give number.)

Previously listed as a user on institutional license 9-11026-1

U. S. Naval Hospital, Jacksonville, Fla.

Clinical Laboratory

 INDIVIDUAL USER(S). (Name and title of individual(s) who will use or directly supervise use of byproduct material. Give training and experience in Items 8 and 9.)



 RADIATION PROTECTION OFFICER. (Name of person designated as radiation protection officer if other than individual user. Attach resume of his training and experience as in Items 8 and 9.)

Radiology Service
NAVAL HSOPITAL
USS SANCTUARY (AH17)

 (a) BYPRODUCT MATERIAL. (Elements and mass number of each.)

,

Iodine 125

Iodine 131

(b) CHEMICAL AND/OR PHYSICAL FORM AND MAXIMUM NUMBER OF MILLICURIES OF EACH CHEMICAL AND/OR PHYSICAL FORM THAT YOU WILL POSSESS AT ANY ONE TIME (If seeled source(s), also state name of manufacturer, model number,
number of sources and maximum activity per source.)

Iodinated Human Serum Albumin

1 millicurie

Iodinated Human Serum Albumin

1 millicurie

7. DESCRIBE PURPOSE FOR WHICH BYPRODUCT MATERIAL WILL BE USED. (If byproduct material is for "human use," supplement A (Form AEC-3 13a) must be completed in lieu of this item. If byproduct material is in the form of a sealed source, include the make and model number of the storage container and/or device in which the source will be stored and/or used.)

See Form AEC-313a

USS SANCTUARY (AH-17)

FLEET POST OFFICE SAN FRANCISCO, CALIFORNIA 96601

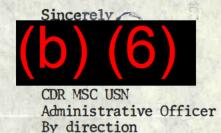
> H:WPA:jws 5000 10 Feb 1969

(a)

Richard E. CUNNINGHAM Chief Isotopes Branch Division of Materials Licensing U.S. Atomic Energy Commission Washington, D.C. 20545

Dear Mr. CUNNINGHAM:

Our failure to submit renewal application for by product material (Radioisotope) license is due to some difficulties encountered resulting from our frequent change of personnel. We intend to apply for renewal and are presently in the process of re-evaluation of our isotope program. No procedures utilizing radioisotopes have been performed since expiration of previous license on 31 Dec 1968, and in accordance with regulations, none will be performed until final action has been taken on our application. The application will be forwarded as soon as our re-evaluation is complete which should be only a matter of a few days.



EDR DIV. OF COMPLIANCE

Withing in 4-2-69